

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			09/23/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	SA	68966 9/20	7-5-00

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

BEST AVAILABLE COPY

Claim	Date
Final	
Original	
1	6/23/00
2	6/23/00
3	6/23/00
4	6/23/00
5	6/23/00
6	6/23/00
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8	6/23/00
9	6/23/00
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44	6/23/00
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47	6/23/00
48	6/23/00
49	6/23/00
50	6/23/00

Claim	Date
Final	
Original	
51	2/6/04
52	2/6/04
53	2/6/04
54	2/6/04
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99	2/6/04
100	2/6/04

Claim	Date
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If more than 150 claims or 10 actions  
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